Penn Hills Office 11 Duff Road Penn Hills, PA 15235 Pax: (412) 241-6840 Pax: (412) McKeesport Office 627 Lylse Boulevard McKeesport, PA 15132 Phone: (412) 664-4049 Fax: (412) 664-4053

#### CONSTITUENT SERVICES

E-Mail: rep.doyle@mail.house.gov/doyle

133 Cannon HOB
Washington, D.C. 20515
Phone: 202-225-2135
Fax: 202-225-3084

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Congress of the United States House of Representatives Washington, D.C. 20515



# U.S. Representative MIKE DOYLE

SENIOR ISSUES NEWSLETTER - 2002



Dear Friends:

It is my privledge to provide you the 2002 Senior Issues Newsletter. In this newsletter, you will find information regarding the issues that affect you and your family.

If you have any questions about the legislation discussed in this newsletter, please contact my Washington, D.C., office. However, if your concern is a problem with a federal agency like the Social Security Administration or the Department of Veterans' Affairs please contact the district office nearest to you. The telephone numbers and addresses of these offices are listed on the back of this newsletter. In addition, you can also send an E-mail regarding your concern to rep.doyle@mail.house.gov or request assistance through the 18th Congressional District web page at

http://www.house.gov/doyle.

Thank you for taking the time to read this newsletter. It continues to be an honor and privilege to serve you, and I look forward to hearing from you soon.

Sincerely.

Mike

WHAT'S INSIDE:
PRESCRIPTION



DRUG DEBATE

## WASHINGTON UPDATE

Naturally Occurring Retirement Communities (NORC) - As America's population ages, trends indicate that many seniors choose to remain in the homes and communities they have lived in all their lives. These communities have been referred to as naturally occurring retirement communities (NORCs) and can occur in housing complexes or neighborhoods of individual homes.

I am glad to report that Pittsburgh was one of five cities nationwide to be selected as a demonstration project for this new national trend toward senior living and senior care and that a total of \$500,000 in federal funding will be coming to Pittsburgh this year for NORC projects. The Jewish Association on Aging (JAA) will receive \$200,000 to serve NORCs in the Pittsburgh area, and the Homstead LIFE Center will receive \$300,000 for the services



Rep. Doyle participates in the ground breaking of the Homestead LIFE (Living Independently for Elders) Center last year. The first phase of the renovations were completed in May 2002 and include a new medical and social service center for elderly people living within the 27 neighboring municipalities. Rep. Doyle secured \$300,000 in federal funding for this facility.

it provides to Homestead and the 27 surrounding communities. These funds will make it easier to provide seniors the access to services they need to maintain their independence and dignity.

The JAA NORC project and the Homestead LIFE Center are two very important initiatives because they are dedicated to providing seniors independence in their living and greater accessibility in their care.

In an effort to further develop the means for seniors to stay in their own homes longer and maintain their independence and social interaction, I have introduced legislation, the NORC Support Act, that would provide for a constant stream of funding for the NORC programs, similar to those in Pittsburgh, through the Older Americans Act. This legislation will help reduce the cost of long term care by providing access to a safety net of community based health care professionals for our nation's seniors.

By providing funding for programs that offier supportive services to NORCs, we are allowing our elderly population to remain in comfortable and familiar surroundings. This in turn will help to preserve their independence and dignity. Bringing caregiver and medical support to NORCs prevents the unnecessary hospitalizations and expensive nursing home or assisted living stays.

Expanding Social Security Benefits for Widows - On May 14, 2002, I voted for legislation, which passed the House, called the Social Security Benefit Enhancements for Women Act, H.R. 4069. This legislation updates benefit eligibility requirements resulting in higher benefits and expanded eligibility for elderly and disabled widows and divorced spouses. For example, this bill would expand Social Security Benefits by easing the penalties on those whose spouses retire early, then die, leaving their spouses with reduced benefits for life. Once implemented, more than 120,000 women would see enhancements to their monthly benefit. This bill is currently waiting action in the Senate.

<u>STOP Stroke</u> – In an effort to provide resources to improve stroke education, research and patient care, I became a cosponsor of the Stroke Treatment and Ongoing Prevention (STOP Stroke) Act, H.R. 3431. Education is an essential component of stroke prevention. This legislation would help to educate the public as well as provide financial resources to provide the best treatment possible for stroke victims. This legislation has been referred to the House Energy and Commerce Committee's Health Subcommittee.

#### PRESCRIPTION DRUG BENEFITS FOR SENIORS

In this day and age of medical advances and technologies, prescription drugs and drug therapies are saving and changing lives. Unfortunately, despite the life-saving benefits of pharmaceuticals, many people are being shut out from the benefits of these medical advances because of the exorbitant costs.

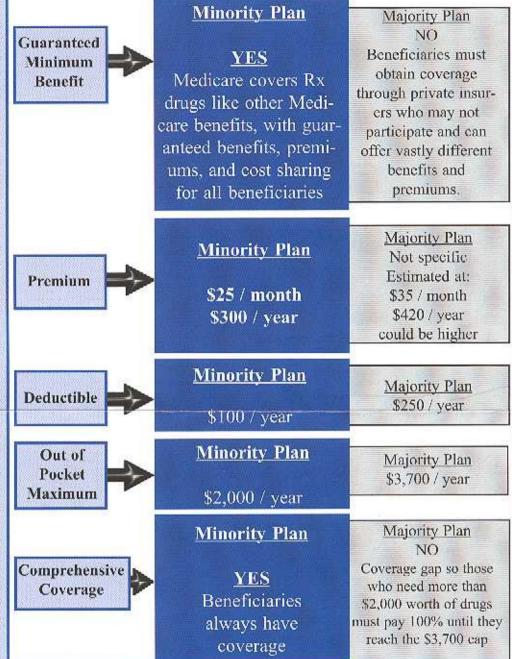
One of my top priorities is to enact a prescription drug benefit that provides real relief to seniors. It is my belief that a prescription drug benefit should be voluntary, affordable, provide comprehensive and universal coverage to all seniors, and be administered through Medicare. For this reason, I supported the Democratic Minority Medicare Prescription Benefit and Discount Act.

Under the Minority plan, which would add a new part to the existing Medicare program, a senior would receive some type of assistance for every dollar they spend on prescription drugs.

However, there are some in Washington who have different ideas as to how to provide prescription drug benefits to our nation's seniors. Where the Minority plan offers a guaranteed benefit through Medicare, the Republican Majority proposal uses taxpayer dollars to subsidize private HMOs and managed care companies to offer prescription drug plans.

#### **Prescription Drug Benefits**

Democratic Minority Plan vs. Republican Majority Plan



Unfortunately, the Majority Leadership in the House did not allow the Minority prescription drug package to be debated and voted on in the House. The only prescription drug proposal that we were able to vote on was the Majority's plan.

I voted against this bill because it provides little assistance to seniors and lacks the type of comprehensive, guaranteed benefit needed to make a difference. In addition, it relies upon the integrity of the insurance companies to step up to the plate and offer our seniors affordable prescription drug-only plans as opposed to setting standards under Medicare.

It is my hope now that the Senate will pass the prescription drug proposal similar to the House Minority plan and present a real comprehensive prescription drug plan for the Congress to vote on - a plan that I can support because I know it will provide the right kind of benefit that will help the seniors of this nation. This issue is too important to play politics. Plain and simple, it is about offering a better solution to high drug prices for our seniors.



Rep. Doyle talks to one of his senior citizen constituents about issues such as prescription drug costs, Social Security and Medicare during his visit to the McKeesport Senior Center.

#### Calculate Your Spending on Prescription Drugs

Democratic Minority plan vs. Republican Majority plan



Prescription Drugs Spending per year	Minority Plan Out of Pocket Spending per year	Majority Plan Out of Pocket Spending per year	Savings Under the Minority Plan per year
\$3,000	\$980	\$2,320	\$1,340
\$3,600	\$1,100	\$2,920	\$1,820
\$4,200	\$1,220	\$3,520	\$2,300
\$4,880	\$1,356	\$4,120	\$2,764
\$6,000	\$1,580	\$4,120	\$2,540

### BUDGET PRIORITIES: Paying For A Real Prescription Drug Benefit

A prescription drug benefit that adequately meets beneficiaries' needs is achievable: it is only a matter of priorities. This is the difference between the Democratic Minority proposal and the Republican Majority plan.

The Minority proposal prioritizes providing a comprehensive prescription drug benefit and commits to finding the funding for a true and reliable benefit through Medicare. In contrast, the Majority proposal limits the amount of funding dedicated toward this necessary benefit.



Last year, almost half of all elderly households received absolutely no benefit from the Majority's \$1.7 trillion tax cut package. Now, the Majority is unwilling to devote even half of what their tax cut plan cost to provide meaningful prescription drug coverage for seniors. Additionally, the Majority's plan to permanently repeal the estate tax for the wealthiest 3% of Americans does not widely impact the seniors citizens in this country. Congress had already voted, with my support, to repeal the estate tax for 97% of estate owners in the nation.

But with this additional estate tax repeal legislation for the top 3% of estate owners, the Majority's permanent estate tax repeal is helping about 23,000 of the richest people in the United States, at a cost of more than \$135 billion over ten years. These funds could be used to provide a real prescription drug benefit to the 35 million Medicare beneficiaries.

When faced with the decision between a tax cut for a small number of individuals and universal prescription drug benefits, I decided it was more important to invest in our nation's 35 million seniors.

The Minority prescription drug proposal has made providing a prescription drug benefit a priority in our nation's budget. And yes, while our plan is more costly than the Majority's plan, there is a way to pay for it. We just need to convince Congress that providing a comprehensive drug benefit to millions of seniors is more important than a tax cut for a few thousand estate owners. A prescription drug benefit is long overdue. Making sure it is the right one is all a matter of priorities.